

OHS Outreach Experiment May 20, 2009: Copper Cycle

Permission Slip Information

The Copper Cycle experiment will involve using small amounts of several different chemicals. The chemicals involved in the experiment are: metallic copper, concentrated nitric acid, sodium hydroxide (6 M) solution, sulphuric acid (6 M), metallic magnesium. The experiment will be performed by the students under the supervision of Dr. Andreas Decken and Dr. James Tait from the Department of Chemistry at UNB Fredericton. Safety goggles, gloves and laboratory coats will be provided to the students. The students are expected to wear clothing that minimizes exposed skin, and also closed-toed shoes. Students that are not appropriately attired to work in a chemistry laboratory will not be permitted to perform the experiment because of concern for their safety. This experiment has been previously performed by over 300 Chemistry 1006 students during the Fall 2008 semester.

Parent/Guardian Consent

Name of Student _____

I hereby consent to allow the UNB Department of Chemistry to take photos of the above noted child for UNB promotional purposes.

Signature: _____

Dear Parents,

As you will note above we have been provided with the opportunity to go to UNB Fredericton and do a chemistry experiment in their "state of the art" laboratory facility. Would you please sign this form in two places, as the top portion of this information sheet is going to UNB and the bottom portion is going to OHS.

Thank-you,

Mrs. JE Sanford

The following student, named below will be traveling by bus to UNB on May 20 to do an experiment in one of the Chemistry labs in FJ Toole Hall on campus. They will be leaving at 8:45 am and will be returning in time to go to period 4. They understand that they will be responsible for any missed work from other classes. They will be expected to bring a drink and a bag lunch as we will be travelling back to OHS by bus during the noon hour.

Please sign below indicating that _____ has your permission to attend.

Period	signature	Name(printed)
Period 1		
Period 2		
Period 3		
Parental Permission		

Contact Phone Number for parent named above.	Work:	Home:	
Medicare Number for student			
Name Of Student			